

GEARING UP FOR THE YEAR-END REPORTING SEASON

By Ben Fouts, Data Analyst, RCHC

Data Workgroup Webinar, October 13, 2020

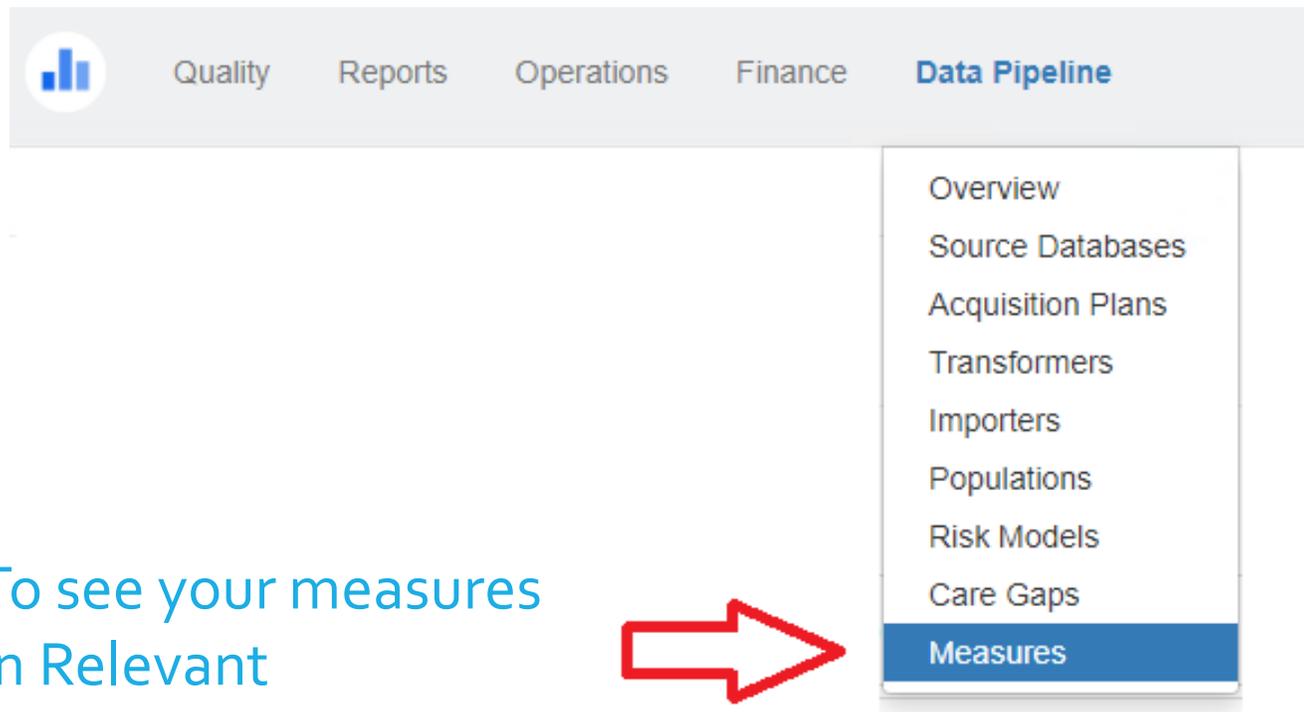
Agenda

1. The 2020 Relevant Report Set
2. Validation to do Now
3. Medication transformer versus medication groups/names
4. 2020 OSHPD

THE 2020 RELEVANT REPORT SET

The 2020 Measures Are Here!

See e-mail from Paul Salcuni on September 18, 2020. It has links to changes and required mappings



The image shows a navigation bar with a bar chart icon on the left and five menu items: Quality, Reports, Operations, Finance, and Data Pipeline. The Data Pipeline menu is expanded, showing a list of sub-items: Overview, Source Databases, Acquisition Plans, Transformers, Importers, Populations, Risk Models, Care Gaps, and Measures. The Measures item is highlighted with a blue background. A red arrow points from the text 'To see your measures in Relevant' to the Measures item in the menu.

Quality Reports Operations Finance **Data Pipeline**

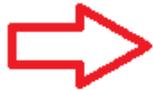
- Overview
- Source Databases
- Acquisition Plans
- Transformers
- Importers
- Populations
- Risk Models
- Care Gaps
- Measures**

To see your measures in Relevant

Look for the "2020" Version

Data Pipeline: Measures

Measure	Last run ended	Last run took		
 Cervical Cancer Screening (UDS 2017 Table 6B)	Friday, 07/10/20, 10:24 AM	12 mins 47 secs	<input type="checkbox"/>	Run
 Cervical Cancer Screening (UDS 2018 Table 6B)	Friday, 07/10/20, 10:24 AM	1 min	<input type="checkbox"/>	Run
 Cervical Cancer Screening (UDS 2019 Table 6B)	Monday, 10/12/20, 4:18 AM	1 min 36 secs	<input checked="" type="checkbox"/>	Run
 Cervical Cancer Screening (UDS 2020 Table 6B)			<input type="checkbox"/>	Run



Toggle

List of Reports

- Breast Cancer Screening (UDS 2020 Table 6B)
- Cervical Cancer Screening (UDS 2020 Table 6B)
- Childhood Immunization Status (UDS 2020 Table 6B)
- Colorectal Cancer Screening (UDS 2020 Table 6B)
- Controlling High Blood Pressure (UDS 2020 Table 7)
- Dental Sealants for Children between 6–9 Years (UDS 2020 Table 6B)
- Depression Remission at Twelve Months (UDS 2020 Table 6B)
- Diabetes: Hemoglobin A_{1c} Control ($\leq 9\%$) (UDS 2020 Table 7, inverted)
- HIV Linkage to Care (UDS 2020 Table 6B)
- HIV Screening (UDS 2020 Table 6B)
- Ischemic Vascular Disease (IVD): Use of Aspirin or Another Antiplatelet (UDS 2020 Table 6B)
- Preventive Care and Screening: BMI Screening and Follow-Up Plan (UDS 2020 Table 6B)
- Preventive Care and Screening: Screening for Depression and Follow-Up Plan (UDS 2020 Table 6B)
- Preventive Care and Screening: Tobacco Use: Screening And Cessation Intervention (UDS 2020 Table 6B)
- Statin Therapy for the Prevention and Treatment of Cardiovascular Disease (UDS 2020 Table 6B)
- Weight Assessment and Counseling for Nutrition and Physical Activity for Children and Adolescents (UDS 2020 Table 6B)

List of Reports, Continued

- Birth Weight: Normal (UDS 2020 Table 7)

Low

Very Low

- Early Entry into Prenatal Care First Trimester (UDS 2020 Table 6B)

Second

Third

New Reports to Validate

- Breast Cancer Screening (UDS 2020 Table 6B)
- Depression Remission at Twelve Months (UDS 2020 Table 6B)
- HIV Screening (UDS 2020 Table 6B)

Refer to the eCQM Technical Description

2020 UDS Instructions

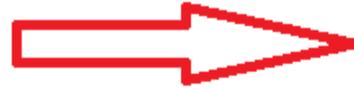
Breast Cancer Screening (Line 11a),

Click [CMS125v8](#)

Measure Description

Percentage of women 50–74 years of age who had a mammogram to screen for breast cancer in the 27 months prior to the end of the measurement period

Webpage



Breast Cancer Screening

[Receive updates on this topic](#)

eCQMs for 2020 Performance Period

CMS eCQM ID or Title

Apply

[CMS2v9](#)

[CMS22v8](#)

Specifications

Attachment	Click	Size
CMS125v8.html		69.51 KB
CMS125v8.zip (ZIP)		93.08 KB
CMS125v8-TRN.xlsx (Excel)		23 KB

Webpage



eCQM Title	Breast Cancer Screening		
eCQM Identifier (Measure Authoring Tool)	125	eCQM Version number	8.4.000
NQF Number	Not Applicable	GUID	19783c1b
Measurement Period	January 1, 20XX through December 31, 20XX		
Measure Steward	National Committee for Quality Assurance		
Measure Developer	National Committee for Quality Assurance		

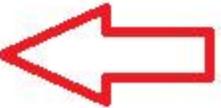
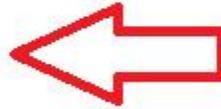
Check for Importers to Create

Measure SQL and configuration:

Measures: Breast Cancer Screening (UDS 2020 Table 6B)

Required importers

- Patients (✓)
- Mammograms (✓)
- Mastectomies (✓)
- Hospice care interventions (✓)
- Long term care stays (create)
- Frailty cases (create)
- Advanced illness cases (create)
- Dementia medications (create)



New Transformers/Importers to Create and Validate

Breast Cancer Screening

- Since this was a QIP measure, there should already be Transformers/Importers for mammograms and mastectomies
- Exclusions built into Importers:
 - ❑ Frailty Cases (there is a Value Set containing diagnosis codes)
 - ❑ Dementia Medications (there is a Value Set containing medication codes)
 - ❑ Advanced Illness Cases (might need to be put into structured data)
 - ❑ Care Services in Long-Term Residential Facility (might need to be put into structured data)

New Transformers/Importers to Create and Validate

Depression Remission at Twelve Months

- The following diagnosis groups have Value Sets containing diagnosis codes:
 - Major Depression Including Remission
 - Bipolar Disorder
 - Dysthymia
 - Personality Disorder
 - Pervasive Developmental Disorder
 - Schizophrenia or Psychotic Disorder

New Transformers/Importers to Create and Validate

HIV Screening

- Importer for HIV Screening Tests can use the Value Set “Human Immunodeficiency Virus (HIV) Laboratory Test Codes” to define the LOINC codes
- Importer for HIV Cases uses a different Value Set than the HIV Linkage to Care measure

2020 Quality Measures that Were Different in 2019

Controlling High Blood Pressure (UDS 2020 Table 7)

- The requirement for being first diagnosed with essential hypertension on June 30 or prior has been removed.
- A study done at the beginning of 2020 found that across all RCHC health centers, the number of patients in the denominator increased by 9.4% and the measure numerator decreased by 1.4%.

2019 Measure description (UDS Manual, page 99)	2020 Measure description (UDS Manual, page 100)
Patients 18 through 85 years of age who had a diagnosis of essential hypertension <u>within the first six months</u> of the measurement period or any time prior to the measurement period with a medical visit during the measurement period.	Patients 18 through 85 years of age who had a diagnosis of essential hypertension overlapping the measurement period with a medical visit during the measurement period.

2020 Quality Measures that Were Different in 2019

HIV Linkage to Care (UDS 2020 Table 6B)

- Change to the follow-up treatment timeline from 90 days after initial diagnosis to 30 days.

2019 Measure description (UDS Manual, page 88)	2020 Measure description (UDS Manual, page 88)
Newly diagnosed HIV patients that received treatment within 90 days of diagnosis.	Newly diagnosed HIV patients that received treatment within 30 days of diagnosis.

Recommended Procedure

- Validate the new QMs separately
- Note the QMs with different definitions and validate the change
- For the rest, compare the 2020 data to the 2019 data
- For the QMs that are the same, the data should be the same for numerators and denominators

Recommended Procedure, Continued

- At an appropriate time, turn on a specific 2020 QM and compare the data to the 2019 QM data
- Remember that the 2020 QMs that you activate will be visible to others, so either inform your data team you are validating them or activate and then inactivate. You may even want to do one at a time.

Recommended Procedure, Continued

- If there are differences from 2019 to 2020, check the code. What changed?
- There could have been a difference in the denominator inclusion, or the value of the numerator or exclusion.
- Identify which patients are different. Why did something appear in one data set and not the another?

Recommended Procedure, Continued

- One approach is to export the 2019 and 2020 patients to a single Excel spreadsheet.
- Then sort each year by account number. In Excel, you can compare cells in the same row by typing cell 1 = cell 2 in another column. If the comparison cells are NOT the same, the result cell will display FALSE

	A	B	C	D	E	F	G	H	I	J	K
1	2019				2020				2020		
2	MRN	Numerator	Excluded		MRN	Numerator	Excluded		MRN	Numerator	Excluded
3	555999	Y	N		555999	Y	N		=A3=E3	TRUE	TRUE
4	556000	Y	N		556000	N	N		TRUE	FALSE	TRUE
5	556001	Y	N		556001	Y	Y		TRUE	TRUE	FALSE

Recommended Procedure, Continued

- Possible Relevant Webinar on the UDS set-up?
- As of today, Ben has not yet done my own general validation of the new or changed measures.
- I will check the code on the RCHC level for logical consistency and investigate things I don't understand. Individual health centers should also feel independently confident with their own measures.
- Put the measures to the test! Gather data and examples that can support any conclusions that point to an error. Send feedback to Relevant.

If anything about this data point is wrong, click here to report a discrepancy



VALIDATION TO DO NOW

Work for October and November

- The goal at this time is to make sure that certain Transformers and Importers are picking up data in a standard manner, as defined by the Value Sets for each measure (eCQM)
- It was recommended by the RCHC Data Standards and Integrity Council that health centers incorporate Value Sets directly in their Transformers and Importers
- Refer to the slideshow from the August 11, 2020 Data Workgroup Webinar, “Practical Uses of the RCHC Validation Report Set”
- See the section in that slideshow, “Using Value Set Reports”

Alternative

- If you have not set-up the Transformers and Importers to directly tap the Value Sets, then you should ensure that any hard-coding is correct, or in other words, uses the exact same codes as defined by the Value Set
- This procedure takes more time overall because, theoretically, you will need to do it each year
- By directly using the Value Sets, the codes are automatically updated each year

Defining the Current (2020) Codes

- Value Sets are used to define Diagnoses (ICD), procedures (CPT), labs (LOINC), medications (RxNorm), and vaccines (CVX)
- There is a set of Validation Reports that display these codes and are helpful to show the codes being used in your system
- Medications are a special case, and we will talk about it in the next section of this presentation

Defining the Current (2020) Codes

- The report “RCHC List of QM Value Set Codes” displays all of the codes in all of the Value Sets. Export the huge list to Excel and filter for each Value Set
- For example,

Results table +

Measure Qm	Cms Code	Value Set Name	Value Set Oid	Ehr Target	Code System Name	Code Value	Code Description	Code System Version	More Than One Qm
Depression Remission at Twelve Months	CMS159v8	Major Depression Including Remission	2.16.840.113883.3.67.1.101.3.2444	Problem List: main chronic diseases	ICD10CM	F32.1	Major depressive disorder, single episode, moderate	2020	false
Depression Remission at Twelve Months	CMS159v8	Major Depression Including Remission	2.16.840.113883.3.67.1.101.3.2444	Problem List: main chronic diseases	ICD10CM	F32.2	Major depressive disorder, single episode, severe without psychotic features	2020	false

USING THE MEDICATION TRANSFORMER VERSUS USING MEDICATION GROUPS/NAMES

Making the Choice

How Does Your Health Center Define Medications?

- Medication groups
- Medication names

- Alternative: use the Transformer relevant_medications

Example

Identification of Tobacco Medications

eCW

- Meds manually assigned to an Rx Group named "Tob Cessation"
- Transformer "relevant_tobacco_cessation" identifies medications by referencing the Group

NextGen

Transformer "relevant_tobacco_cessation" identifies medications by name

Alternative Approach

- Transformer "relevant_medications" identifies medications belonging to each Value Set
- Transformer "relevant_tobacco_cessation" identifies medications by referencing the tobacco medication Value Set ID number

Overview of the Issue

Using hard-coding for medication names or manually adding medications to groups may be missing certain medications because:

- Each year, there are new medications
- Groups of medications can have similar but not exact names
- Some medications have generic and brand names
- In eCW, there are sometimes issues with grouping medications

New Transformer: relevant_medications

- Ben has been working with Relevant on the relevant_medications Transformer. They are close to finishing it!
- But, considering the timing of the final version, you should start thinking about how you might use it to help define medications for your QMs. Will you:
 1. Use the new medication Transformer to directly define medications in the Value Sets of the other medication-related Transformers?
 2. Keep your current approach and use a validation report to list the appropriate medications that can be used to update the medication-related Transformers?

Use The New Medications Transformer

Pro

- More accurate
- Once set-up, updates automatically
- You do not have to examine and update meds every year, so it saves time over the long run

Con

- You have to change the SQL code and this takes time to do and validate

Keep the Design of the Current Transformers

Pro

- They already exist and are in-use.

Con

- ? Accuracy ?
- Need to study which medications are pulled and which are missing
- Need to check again next year and afterward

Medication Validation Reports

- For eCW: RCHC List All Medications and Rx Groups
- For NextGen: RCHC List All Medications NG
- These reports display which medications in your system are associated with the particular Value Set (for example, “Tobacco Use Cessation Pharmacotherapy”)

Medication Validation Reports, Continued

- You would then have to compare the list of Value Set medications to the medications that your Transformer picks up (for example, “relevant_tobacco_cessation”)
- eCW: medications assigned to the medication group specified in the Transformer
- NextGen: medications picked up by name, as specified in the Transformer

Medication Validation Reports , Continued

- Turn on Transformer and update the data (takes a couple of minutes or more)
- Run the report and export the data
- Turn the Transformer off

- NOTE: Ben may have to make a new version of the validation report for the new Transformer. If you already have the original version, it seems to be “mostly” correct.

2020 OSHPD

Initial Steps That Can be Done Now

Initial Thinking

- Ben will be the contact for eCW health centers
- Relevant (Gary) will be the contact for NextGen health centers
- We are not anticipating any major changes to the report tables

eCW Health Centers

- There is more of a standard and structured approach to OSHPD reporting. Review the Relevant instructions from last year
- If you want to get an early start on mapping, run these RCHC Validation Reports:
 1. “RCHC List All Providers, Resources and Staff” -- shows all staff and their assigned OSHPD (and UDS) categories
 2. “RCHC List All Insurance” -- shows all insurance names and their assigned OSHPD (and UDS) categories

Validation Reports

- Good idea to do both UDS and OSHPD at the same time so there is consistency
- You will need to run the report again at the end of the year to catch any new staff or insurance names
- Ben is the RCHC contact for the Validation Reports. Please let me know if the report is not displaying expected data

Questions?